Only

STATEMENT OF

PAGE 1 / 9 =

FORM 1		OI	RGAN	IZAT		V												
												Off	fice U	se On	ly			
NAME OF COMMITTEE (in	full)	\ -	check if name changed)		Exampl over the	e:If typi e lines.	ng, typ	е	12	FE4	4M5							
National As	sociat	ion of	Realtor	's Co	ngre	essic	onal	Fu	ınd									
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ADDDE00 /		430 North	Michigan Ave	nue														
ADDRESS (number a	•																	
is changed		Chicago							, IL			606	11-40)11				
			Y 🛦							ATE 4]-[DE 4	<u> </u>	
COMMITTEE'S E-MA	AIL ADDRES	SS																
(Check if a		sreiter@	realtors.or	g														ı
is changed	d)	Ontional	Second E Mo	:I Addres														
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COMMITTEE'S WEB	PAGE ADD	DRESS (LIR	1)															
(Check if a		1	-)															
is changed	d)																	
2. DATE 0			y y y 2014															
3. FEC IDENTIFIC	CATION NU	IMBER ▶	C	C0048	38742													
4. IS THIS STATEM	MENT	NEW ((N) OI	2	×	AMEN	IDED (A)										
I certify that I have e	examined th	is Statemen	t and to the	best of r	my knov	wledge a	and be	lief it	is tru	e, co	rrect	and	com	plete				
Type or Print Name	of Treasurer	Michael C	McGrew															
Signature of Treasure	er <i>Micha</i>	el C McGrew			[El	ectronica	lly Filea	<u>i</u> j	Date	[02	M /	D 1	D 4	/ _Y	20°		Υ
NOTE: Submission of			mplete informa GE IN INFOR	_			_	_					pena	lties o	of 2 L	J.S.C.	§43	7g.
Office Use					Fed	r further deral Elec I Free 800	tion Con	nmissio						C F				_

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complinformation below.)	ete the candidate
Nam Can	e of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	N 4' -
(d)		· · · · · ·	Democratic, epublican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		X In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number C	
	2.	FEC ID number C	
	3.	FEC ID number	
	4		

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FEC Form 1 (Re	vised 02/2009)	Page 3
Write or Type Committee	2 Name	
National Ass	sociation of Realtors Congressional Fund	
6. Name of Any Conne	ected Organization, Affiliated Committee, Joint Fundraising Representative, or L	_eadership PAC Sponsor
Texas Association	n of Realtors Federal PAC	
Mailing Address	PO Box 2246	
J		
	Austin TX 7	78768-2246
	CITY STATE	ZIP CODE
	nnected Organization X Affiliated Committee Joint Fundraising Representative	
 Custodian of Record books and records. 	s: Identify by name, address (phone number optional) and position of the person	n in possession of committee
Kar Full Name	ren Paschal	
Mailing Address	430 N. MICHIGAN	
Ü		
	Chicago IL 6	50611-4011
Title or Decition	CITY STATE	ZID CODE
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number 312	329 8239
	me and address (phone number optional) of the treasurer of the committee; and (e.g., assistant treasurer).	I the name and address of
I dii Italiio	hael C McGrew	
of Treasurer	1727 Lake Alvamar Drive	
Mailing Address		
	Lawrence KS 16	66047-9302
	Lawrence KS 6	ZIP CODE
Title or Position Treasurer	785	841 4227

841

Telephone number

	m 1 (Revised 02/2009)	Page 4
Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit b	r Depositories: List all banks or other depositories in which the committee deposits funds, holoxes or maintains funds.	
safety deposit b Name of Bank,	oxes or maintains funds. Depository, etc.	
	oxes or maintains funds. Depository, etc. The Northern Trust Company	
	oxes or maintains funds. Depository, etc. The Northern Trust Company ,50 S LaSalle Street	
Name of Bank,	oxes or maintains funds. Depository, etc. The Northern Trust Company ,50 S LaSalle Street	
Name of Bank,	oxes or maintains funds. Depository, etc. The Northern Trust Company ,50 S LaSalle Street	
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Name of Bank,	Depository, etc. The Northern Trust Company 50 S LaSalle Street Chicago CITY STATE	ZIP CODE
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Name of Bank, Mailing Address Name of Bank,	Depository, etc. The Northern Trust Company 50 S LaSalle Street Chicago CITY STATE Depository, etc.	ZIP CODE

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Form/Schedule: F1A
Transaction ID:

02/14/2014: Please be advised we are amending our Statement of Organization to change the name of the Treasurer and the name of the Custodian of Records.

Form/Schedule: Transaction ID:

Page 6 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor **ILLINOIS RPAC FED** 522 S Fifth St Mailing Address Springfield IL 62703-**CITY** STATE 4 ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number

Page 7 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor California Real Estate Political Action Committee 525 S. Virgil Avenue Mailing Address 90020-1403 Los Angeles CA **CITY** STATE 4 ZIP CODE Relationship: Joint Fundraising Representative Leadership PAC Sponsor Connected Organization Affiliated Committee [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number

Page 8 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor National Association of Realtors Political Action Committee 430 North Michigan Avenue Mailing Address Chicago IL 60611-4011 **CITY** STATE 4 ZIP CODE Relationship: Joint Fundraising Representative Leadership PAC Sponsor Connected Organization Affiliated Committee [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number

FEC Form 1G (Revised 06/2011) Page List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address ZIP CODE 🛕 CITY 🗖 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Minnesota Assoc of Realtors Federal PAC 5750 Lincoln Drive Mailing Address MN 55436-1663 Edina **CITY** STATE 4 ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number